

ARTICLE 33-12

CARE OF TUBERCULAR PERSONS

Chapter
33-12-01 Tuberculosis

CHAPTER 33-12-01 TUBERCULOSIS

Section	
33-12-01-01	Purpose
33-12-01-01.1	Authority
33-12-01-01.2	Definitions
33-12-01-02	Contract Fee for General Hospitals
33-12-01-03	Hospitalization
33-12-01-04	Outpatient Services
33-12-01-05	Drugs and Medication
33-12-01-06	Bacteriology
33-12-01-07	Severability

33-12-01-01. Purpose. It is the purpose of this article to provide inpatient and outpatient care to persons afflicted or suspected of being afflicted with tuberculosis in order to protect the public health, safety, and welfare of the people of the state of North Dakota. It is also the intent of this article to promote and apply procedures necessary to prevent the spread of tuberculosis in the state. This article shall be applied in conjunction with North Dakota Century Code chapters 23-01 and 23-07.1.

History: Amended effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-07.1-01

33-12-01-01.1. Authority. The North Dakota state department of health has been authorized to promulgate and administer this article under North Dakota Century Code chapters 23-01 and 23-07.1.

History: Effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-07.1-04

33-12-01-01.2. Definitions. As used in this article, the following words shall have the meanings given to them in this section, unless otherwise made inappropriate by use and context.

1. "Afflicted" means having documented active tuberculous disease.
2. "Communicable" means capable of being transmitted from one person to another.

3. "Contagious" means bearing contagion and communicable by contact.
4. "Contract" means an agreement (monetarily) between the state health department and any hospital for the care of a tuberculosis patient.
5. "Designee" means a state health department employee designated to administer the tuberculosis control program.
6. "Epidemiology" means the process of controlling a disease in a population.
7. "Evaluation" means medical and medication status, determined by physician, nurse practitioner, or nurse.
8. "Inpatient" means hospitalized for treatment of tuberculous disease.
9. "Isolation" means separation, for the period of communicability, of infected persons from others, to prevent conveyance of infectious agent to susceptible persons.
10. "License hospital" means any hospital which is licensed by the hospital facilities division of the state department of health.
11. "Outpatient" means being followed for treatment, diagnostic, and epidemiologic purposes.
12. "Practicing physician" means any licensed medical doctor practicing medicine.
13. "Quarantine" means limitation of freedom of movement of a diseased person until the person is no longer a public health hazard.
14. "Recalcitrant" means a person with active, contagious tuberculosis not responsive to handling or treatment.
15. "State health council" means the policymaking body of the state health department.
16. "Suspect" means a person whose medical history and symptoms suggests that the person may be developing some communicable disease.
17. "Temporary order" means process by which an individual in question is commanded to appear and answer cause.

History: Effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-07.1-04

33-12-01-02. Contract fee for general hospitals.

1. The department should establish a contract with the general hospitals in the larger cities for the care of tuberculosis patients, who do not have a third-party payment source.
2. The department will pay the standard fee for hospitalization.
3. The department will only pay for services relevant to the treatment of tuberculosis. Payment for services above the normal treatment requirement for tuberculosis will be the responsibility of the patient and/or provider.

History: Amended effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-07.1-04

33-12-01-03. Hospitalization. The state department of health will authorize therapeutic admissions and the patients being treated for established tuberculosis are eligible for continued hospitalization as long as medically indicated; however, the state department of health will not pay for any patient care, treatment, maintenance, or transportation if assistance is available through other sources or that third-party payers are required to provide.

History: Amended effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-01-03, 23-07.1-04

33-12-01-04. Outpatient services.

1. Tuberculosis diagnostic services are available at state supported outpatient clinics. Payment for diagnostic services performed at a facility other than the state supported outpatient clinics will be the responsibility of the patient.
2. Upon discharge from a contract hospital for treatment of active tuberculosis, each patient may receive some or all of the patient's medical supervision at an existing state supported outpatient clinic.

History: Amended effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-01-03, 23-07.1-04

33-12-01-05. Drugs and medication.

1. All antituberculosis drugs and medication approved by the state department of health for treatment of tuberculosis patients shall be provided by the state department of health.

2. All approved tuberculosis drugs and medications utilized for preventive treatment (chemoprophylaxis) shall be provided by the state department of health. If they are provided by an unauthorized facility they must be at the expense of the patient or other applicable third parties.

History: Amended effective November 1, 1980.

General Authority: NDCC 23-01-03, 23-07.1-04

Law Implemented: NDCC 23-01-03, 23-07.1-04

33-12-01-06. Bacteriology. Any specimens taken from a patient in an attempt to isolate microbacterium tuberculosis shall be processed at the Bismarck public health laboratory. Specimens not run at the public health laboratory will not be authorized by the state department of health and if they are performed at an unauthorized facility they must be at the expense of the patient or other applicable third parties.

General Authority: NDCC 23-01-03

Law Implemented: NDCC 23-01-03

33-12-01-07. Severability. If any provision of this article or the application thereof to any person or circumstances is held to be invalid, such invalidity shall not affect other provisions or application of any other part of this article which can be given effect without the invalid provision or application and to this end the provisions of this article and the various applications thereof are declared to be severable.

History: Effective November 1, 1980.

General Authority: NDCC 23-01-03

Law Implemented: NDCC 23-01-03